

ADMINISTRATIVE FILE

*American Protestant  
Hospital Association*

*X Lyons, Leo M.*

919 NORTH TAYLOR AVENUE - SAINT LOUIS 8, MISSOURI - JEFFERSON 5-6006

*X Division*

ROBERT GUY  
ADMINISTRATOR

**M**issouri  
**B**aptist  
**H**ospital

January 29, 1964

Mr. Harold W. Gibbons, President  
Teenagers Joint Council No. 13  
1641 S. Kingshighway  
St. Louis, Missouri

Dear Mr. Gibbons:

Due to the lack of time, I was only able to talk to you briefly in the office of the Sheraton-Jefferson garage yesterday.

My father received his fifty year membership recognition from the International Typographical Union prior to his death and as a member of a working men's family, I know the problems and heartache. Also, in my position here at the hospital the past fourteen years, I have seen great strides in the field of third party payment of hospital care and could understand clearly your message to the hospital group.

I appreciate your leadership and wish you every success in the future.

Sincerely,

*Mary Ann Learned*  
Mary Ann Learned  
Credit Manager

ADMINISTRATIVE FILE

*American Protestant  
Hospital Association  
Byers, Mo. M.  
Invitation*

MISSOURI BAPTIST HOSPITAL  
919 NORTH TAYLOR AVENUE  
ST. LOUIS 8, MISSOURI

ROBERT GUY  
ADMINISTRATOR

February 11, 1964

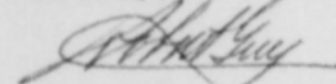
Mr. Harold J. Gibbons, Vice President  
International Brotherhood of Teamsters  
25 Louisiana Avenue, N.W.  
Washington 1, D.C.

Dear Mr. Gibbons:

On behalf of the Board of Trustees of the American Protestant Hospital Association and for all those in attendance for the debate session, I want to thank you for your comprehensive and dynamic presentation of the case for government responsibility in caring for the aged.

Whether or not they agreed with your position, everyone present heard a clear and concise statement as to what government should do and why. We felt the session was tremendously informative and we are grateful to you for taking time from your busy schedule to be with us.

Sincerely,



ROBERT GUY  
Immediate Past President  
American Protestant Hospital Association

RG:al



FOUNDED 1889



Telephone MU 5-5510

# Deaconess Hospital

CARL C. RASCHKE, L.H.D., Administrator

6150 OAKLAND AVE., ST. LOUIS 10, MO.

February 3, 1964

ADMINISTRATIVE FILE

*American Protestant  
Hospital Association  
X Lyons, Lee M.  
X Invitation*

Mr. Harold J. Gibbons  
Vice President, International  
Brotherhood of Teamsters and  
President, St. Louis Labor  
Health Institute  
25 Louisiana Ave., N.W.  
Washington 1, D. C.

Dear Mr. Gibbons:

Your reputation as a very knowledgeable, articulate and forceful speaker is certainly justified! The manner in which you presented the case for government having a primary responsibility for financing health care for the aged was most persuasive. I am confident that as a result of this confrontation between you and Mr. Richards many of the participants were forced to go back to the original prelates and to re-examine them in the light of your convictions.

The observation was made repeatedly in sessions and in the corridors that the debate on this most important question was "just tremendous". In fact, I gathered the strong impression that this confrontation was perhaps one of the most important personal contacts which some of the men have had with people of your conviction and ability.

I am indeed sorry that Congressman Curtis could not be present, but I know you would agree with me in expressing appreciation for the very notable job which Mr. Richards did as a substitute.

I am sure that you are aware of the fact that the newspaper and television gave your thoughts considerable coverage and that Radio Station KMOX broadcasted the entire debate on its 8:00 p.m. hour. This is significant coverage, warranted because of the outstanding manner in which you presented your position on this vital question.

LIB 2 8 11 1964

CATHOLIC  
TERRITORY  
RECORDS

Mr. Harold J. Gibbons

-2-

Thank you again for your participation and for the pleasure  
of coming to know you as a person.

Personal best wishes.

Sincerely,

*Carl C. Rascha*

Carl C. Rascha, Administrator,  
Deaconess Hospital and Chairman,  
A.P.H.A. Program Committee

CCR:ls



# AMERICAN PROTESTANT *Hospital* ASSOCIATION

Office of Executive Director,  
LEO M. LYONS  
Phone: WHITENALL 6-2814 S

840 N. LAKE SHORE DRIVE • Room 500 • CHICAGO 11, ILLINOIS

ADMINISTRATIVE FILE ☒  
*American Protestant*  
*Hospital Association*  
*x Lyons, Leo M.*  
*x Invitation*

February 1, 1964

Mr. Harold J. Gibbons, Exec. Asst.  
International Brotherhood of Teamsters  
25 Louisiana Avenue, N. W.  
Washington 1, D. C.

Dear Mr. Gibbons:

The American Protestant Hospital Association and Denomination Groups  
meeting in Annual Assembly are effective because people such as you  
make it so.

Your participation in and substantial contribution to the 1964 meeting  
is very much appreciated.

We thank you on behalf of the Board of Trustees, the Program Committee,  
and the audience for your part in a most successful meeting.

Very truly yours,

*Leo M. Lyons*  
Leo M. Lyons  
Executive Director





ADMINISTRATIVE FILE  
American Protestant  
Hospital Association  
X Lyons, Leo M.  
X Invitation

December 31, 1963

Mr. Leo M. Lyons, Executive Director  
American Protestant Hospital Association  
840 North Lake Shore Drive  
Chicago 11, Illinois

Dear Mr. Lyons:

In accordance with the request contained in your letter of December 19th, I am enclosing copies of my remarks for the Forum Session on January 28th.

Also enclosed is a prepared biography for your information and possible use. Hoping these will be helpful to you, I remain

Very truly yours,

H. J. Gibbons  
Executive Assistant  
to the General President

HJG/mc  
Enclosures

AMERICAN PROTESTANT *Hospital* ASSOCIATION

840 N. LAKE SHORE DRIVE • ROOM 500 • CHICAGO 11, ILLINOIS

Office of Executive Director,  
LEO M. LYONS

PHONE: WHITSHALL 4-2814-5

December 19, 1963

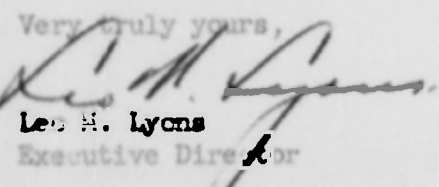
Harold J. Gibbons  
St. Louis Labor Health Institute  
St. Louis, Missouri

Dear Mr. Gibbons:

If it is at all possible we would appreciate receiving copies of the remarks you have in mind for the Forum Session of the APHA on Tuesday, January 28th, 1964.

If you have prepared press releases we would also appreciate copies of the releases.

Very truly yours,

  
Leo M. Lyons

Executive Director

cc: C. G. Gaudin

Mr. Chairman, Congressman Curtis, Ladies and Gentlemen:

Before embarking on our subject, I would like to make a few remarks about medical care in general, since it is directly related to medical care for the aged. The opponents of the Administration Hospital Insurance Act of 1963, HR 3920 and S880, primarily the American Medical Association, in arguing their position, frequently made the statement, in essence, we have the best medical care in the world, therefore, let's keep the status quo. I will not argue with the statement that we have the potentiality of providing the best in medical care for our people, but there is a great difference between potential and actual application.

We are not the country with the greatest longevity!

We are not the country with the lowest maternal or infant mortality rates!

We do rate high in other areas.

We are the country with the highest death rate from Cardio Vascular disease!

We are the country with the highest death rate from Diabetes!

We are the country with the highest death rate from accidents and we have the second highest death rate from cancer. Dr. Luther Terry, the Surgeon General of the United States, had this to say recently - In 1963, 150,000 lives will be lost and a million people will be disabled because of the great lag in the medical knowledge we possess and the application of that knowledge. <sup>to say not</sup> Until this great knowledge is available to all of our people, and not just the select few who have the ability to pay, can we rest easily.

There are present in our population today 17½ million people, aged 65 years and over, nearly one-tenth of our population and their number increases by 1,000 every day. By 1980, they will number nearly 25 million. Today there are already 25 million people aged 60 and over, nearly 6 million aged 75 and over and more than 10,000 over the age of 100. In 1900, the average life expectancy at birth was 49 years. Life expectancy at birth now averages 70 years. While our population



has increased 2½ times since 1900, the number of aged 65 and over has increased almost sixfold.

President Kennedy in his message to congress, February 21, 1963, had this to say, and I quote, "This increase in the lifespan and in the number of our senior citizens, presents this nation with increased opportunities: the opportunity to draw upon their skill and sagacity and the opportunity to provide the respect and recognition they have earned. It is not enough for a great nation merely to have added new years to life - our objective must also be to add new life to those years. In the last three decades, this nation has made considerable progress in securing our older citizens the security and dignity a lifetime of labor deserves. But the "last of life for which the first was made is still not a golden age for all our citizens. Too often, these years are filled with anxiety, illness and even want."

Thinking people who concern themselves with these problems and facts, people who concern themselves with the social welfare of their fellowmen, have the epithet, "Socialist", thrown at them, as if this is a dirty word. Opponents of the Administration's Hospital Insurance Act of 1963, HR 3920 and S660, primarily the American Medical Association would have you believe that there are sinister forces lurking in our midst, prepared to socialize all phases of our life and that this bill is just the opening wedge. Dr. Edward R. Annis, President of the American Medical Association speaking before the Economic Club of Detroit on January 21, 1963 has this to say and I quote "For more than 20 years we have had among us a group quietly and deliberately working to socialize the basic institutions of this nation. So far, they have centered their attentions on the medical profession, but they cannot stop here

*Highly need  
No compromise  
American  
Health Insurance  
Association*

*(End of quote)*

Insert  
page 3

Along the same line, I would like to quote a comment by Michael M. Davis, eminent social scientist in a lecture delivered at Billings Hospital, University of Chicago on May 23, 1963, " I do not need to dwell upon the negative record of the American Medical Association and most state and county medical Societies. A half century of experience does not prevent surprise, sorrow and anger when I read the one-sided statements and the misrepresentations of fact offered physicians by their national professional agency in its campaign against hospital care for the aged through social security. The same standard of impartiality and accuracy that characterize the AMA's scientific articles do not obtain in its articles dealing with the economic and political aspects of medicine." End of quote

if they are to accomplish their task. They must eventually bring under the Socialistic yoke all the major professions if they are to fulfill their goals, for as Arthur Schlesinger, advisor to the President, wrote in "Partisan Review in 1947", "If Socialism is to preserve democracy, it must be brought about step by step in a way which will not disrupt the fabric of custom, law and mutual confidence upon which personal rights depend. The transition must be piecemeal, it must be parliamentary, it must respect civil liberties and the due process of law." End of quote, Dr. Annis quoting Mr. Schlesinger as one of the sinister elements. I certainly see nothing wrong with the steps which Mr. Schlesinger suggests as long as they represent the will of the majority of the people.

A few statistics from the Bureau of the Census - 1960 - tells us that the median income is \$2530, where the head of a two person family is 65 and over and \$5314 where the head of the family is under 65. For individuals living alone the median income is \$1053 for age 65 and over and \$2571 under the age of 65. Other statistics show that it is no longer disputed that 90% of the 65 and over group have annual incomes of less than \$2000 and that for 60% the income is less than \$1000. Seven million, seven hundred thousand older people have less than \$500 in liquid assets. Concerning the statistics which I have mentioned, Dr. Annis further states in his Detroit address, "Their figure is statistically true, but deliberately misleading. My wife and I have eight children, so in the Annis family, 90% of them have no income at all." End of quote. I ask you, who is trying to mislead who?

Certainly children are not included in these income statistics. - is usual answer  
Mr. Annis by saying he has eight children is asking the same question

The allegation has been made that the Administrations Hospital Insurance Act of 1963, HR 3920 and S880, is just an opening wedge for National health insurance. The proposal is essentially complete. It is

add  
Schlesinger  
misleading  
answer

designed to meet the problem of the aged not having the financial resources to purchase adequate protection against their above average health bills. Social security provides a workable mechanism through which they can pay toward the needed health insurance coverage during their working years. There may be some younger people without adequate health insurance, but most can afford to purchase it from their work income. While only a portion of the health costs of the aged would be covered under the proposal, this portion is one that is often involved in expensive illnesses where the need is greatest. Once this basic protection is provided, a large portion of the elderly will buy supplementary protection against the cost of physicians and dentists services and drugs - just as they have in the case of Old Age Survivors Insurance benefits. If there is basic social security protection, if private supplementary protection expands, as can be expected, there will be no need to go further than the present proposal. Furthermore, any extension of the program would have to be legislated by Congress. There is no reason to assume that once they have voted the Social Security hospital insurance program into law, congressmen and senators will suddenly lose all critical judgment and begin to enact health legislation the American people neither need nor want.

The need of hospitalization for the elderly remains at more than twice that of the rest of the population. Sufficient time has elapsed to substantially prove the inadequacy of voluntary commercial insurance plans to meet the needs of this high risk group at premium rates they can afford. The cost of the lowest comprehensive health policy is over \$400 per year for an aged couple and this policy leaves substantial health costs uncovered.



Insert  
pg 5

HIGH RISK GROUP - 65 and OVER

New Republic - November 9, 1963

"Very recently, insurance companies have begun offering new plans for the elderly, and in so doing have fully demonstrated the costs of insuring so high-risk a group. In its first fifteen months of operation, the plan known as "Connecticut 65", a pooled risk venture in which 32 health insurance companies participate, paid out over half a million dollars more than it collected."

Mr. Basil C. Moisan, former President of the National Blue Cross Association had this to say on February 5, 1960 and I quote, "A lifetime's experience has led me at least to conclude that the costs of care of the aged cannot be met, unaided, by the mechanism of insurance or prepayment as they exist today. The aged simply cannot afford to buy from any of these the scope of care that is required, nor do the stern competitive realities permit any carrier, whether non-profit or commercial to provide benefits which are adequate at a price which is feasible for any but a small proportion of of the aged." End of quote.

*Don't think  
any of these  
in light of  
the group*

It is regrettable that very few aged people can afford the extensive health insurance coverage that is possible under voluntary insurance. However, with basic health insurance coverage under Social Security, older people would only need to buy supplemental protection, and really adequate protection would no longer be wishful thinking but instead a practical reality.

The Kerr-Mills Bill has been offered as the answer to the problem. It has not been the answer. As of June 30, 1963, half the states still had no Kerr-Mills Medical Assistance for the aged program in effect. Less than 7 out of every 1000 persons over 65 were drawing benefits. Benefits vary in all of the states and are often severely limited. For example, Kentucky allows 10 days of hospitalization and then only for life endangering conditions.

Alanson Wilcox, General Counsel of the Dept. of Health, Education and Welfare and former Council for the American Hospital Association stated on May 1, 1963, and I quote, "Social insurance is to economic well being what preventive medicine is to health. Social insurance seeks to prevent poverty from arising, while relief measures, such as public assistance and Kerr-Mills, deal with poverty after it has become a fact. The underlying issue in the current debate is whether we shall forestall, so far as we

can, the poverty which health costs create among the aged; or whether we shall wait for poverty to occur and minister only to those who have already exhausted their resources. On July 31, 1963, Governor John M. Dalton of Missouri vetoed the Kerr-Mills Bill for the near-needy. In his veto message the governor asserted that the uncertainty of the future cost of such a program makes it undesirable at this time. Other objections to the bill were based on the tremendous administrative costs involved, in as much as careful checks would have to be made on anyone applying for this aid to determine whether he qualifies.

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AMA  
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"Socialized medicine" is being used as a scare slogan against the Administration Hospital Insurance Act of 1963, HR 3920 and S880. Hospital insurance through Social Security is no more like socialized medicine than are Blue Cross or other insurance plans that pay hospital or medical bills. Socialized medicine is a system where doctors work as employees of the government and the government owns the medical facilities. Hospital insurance through social security is not socialized medicine. Under the hospital insurance program the government would not provide any services, but only provide basic hospital insurance for the aged. Hospital and other services would be paid in much the same way that Blue Cross and other insurance would pay.

The proposed law stated specifically that the government cannot control, regulate, or interfere with the practice of medicine or the operation of participating hospitals. The bill gives government no more authority over hospitals than Blue Cross now has. In fact, the government would have less authority than Blue Cross since it could not set up criteria that are more strict than those approved by the professionally

sponsored joint commission on the Accreditation of Hospitals. Doctors ~~and hospitals~~ will still decide what patients to admit and what patients to discharge. Physicians will still decide what treatment to give. All that government would do is meet the cost of the health services defined by the law after they are given to the patient.

The National Association of Social Workers, one of the many national organizations supporting the Administration Hospital Insurance Act of 1963, HR 3920 and S880, consisting of thousands of people who daily come face to face with the problems of the health needs of the aged had this to say and I quote, "The total system of social insurance, in order to fulfill its social purpose in American life, should protect all workers and their dependents against the major economic hazards of modern life and should provide benefits adequate to maintain a reasonable standard of living commensurate with the nation's productive capacity and sense of social justice - We have studied the arguments against extension of OASDI to health care. We cannot agree with them. The patient's free choice of hospital or physician is not curtailed. It is not a free service. It does not have to reduce quality of care. It will not discourage medical education, research or advancement. It is not socialized medicine. It is not a system of regimenting doctors or bringing them under bureaucratic control." End of quote.

The allegation has been made that the burden of Social Security taxes falls most heavily on low and middle income workers. Labor has been one of the most vocal advocates of the Administration Hospital Insurance Act of 1963, HR 3920 and S880, despite this allegation. Workers do not object. Workers, and this has been made clear by the organizations that represent them, want to pay their share toward social security. This gives them a tangible interest in the program and an earned right to the benefits of the program.



In conclusion, I would like to state that it is the feeling of those favoring passage of the Administrative Hospital Insurance Act of 1963, HR 3920 and S880, that it will make available an orderly savings program so that people, under Social Security during their working years may be given the opportunity to invest a part of their earnings for health care. This will enable them, in the years when their earnings are the lowest and their need for medical care the highest, to enjoy with dignity the benefits which they, themselves, will have earned.

FD-36 (Rev. 10-1-59)



Telephone Mission 5-8510

# Deaconess Hospital

CARL C. RASCHE, L.H.D., Administrator

6150 OAKLAND AVE., ST. LOUIS 10, MO.

December 24, 1963

Mr. Harold J. Gibbons  
Executive Assistant to  
the General President  
International Brotherhood  
of Teamsters  
25 Louisiana Ave., N.W.  
Washington 1, D.C.

ADMINISTRATIVE FILE  
American Protestant  
Hospital Association  
X

Dear Mr. Gibbons:

I am happy to take this opportunity to write concerning your participation in the Annual Meeting of the American Protestant Hospital Association scheduled for Tuesday, January 28, at 3:30 p.m. to be held in the Gold Room of the Sheraton-Jefferson Hotel.

You will note that the time has been moved back a half hour to 3:30 p.m. This was done because the chaplains who will be participating in separate meetings of the Chaplains' Association under the A.P.H.A. wanted to be on hand when you and the Honorable Thomas P. Curtis debate the question, "Financing Medical Care--Whose Responsibility?" We know that this will be a most informative and challenging experience, for you have been an able exponent of Government participation in providing such health care while Mr. Curtis has taken a strong point of view in the opposite direction.

I shall look forward to greeting you at the speaker's table in the Gold Room at approximately 3:15 p.m.

A copy of the advanced flyer which gives the high lights of our 1964 meeting is enclosed.

It is our prayer that you and your loved ones shall have had a most blessed Christmas and that the New Year shall be one which will bring you such challenge and joy.

Personal best wishes.

Sincerely,

*Carl C. Rasche*

Carl C. Rasche, Chairman  
APHA Planning Committee

GCR:la  
Encl.

ADMINISTRATIVE FILE  
*American Protestant*  
*Hospital Association*  
AMERICAN PROTESTANT *Hospital* ASSOCIATION

840 N LAKE SHORE DRIVE • Room 500 • CHICAGO 11, ILLINOIS

Office of Executive Director  
LEO M. LYONS

PHONE: WHiTEHALL 4-2814-5

December 2, 1963

Harold J. Gibbons  
St. Louis Labor Health Institute  
St. Louis, Missouri

Dear Mr. Gibbons:

On Monday evening, January 27, 1964 at 6:30 P.M., the American Protestant Hospital Association and other protestant denominational groups will hold a Fellowship Dinner in the Gold Room of the Sheraton-Jefferson Hotel in St. Louis, Missouri.

Our guest speaker will be the Honorable John M. Dalton, Governor of the State of Missouri, who will speak on "The Responsibility of the Church for Health and Welfare Services". We look forward to a most enjoyable and inspiring evening.

Robert Gay, President of our association, invites you and your lady to be our guests on this momentous occasion, and upon your acceptance we will reserve places for you at the speakers table.

We will be honored by your presence and at the appropriate time, you will be presented to the audience.

Please indicate your acceptance on the enclosed card.

Very truly yours,

*Leo M. Lyons*  
Leo M. Lyons  
Executive Director

encl:

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Telephone Mission 5-8510

# Deaconess Hospital

CARL C. RASCHE, L.H.D., Administrator 6150 OAKLAND AVE., ST. LOUIS 10, MO.

August 7, 1963

Mr. Harold J. Gibbons  
Executive Assistant to  
the General President  
International Brotherhood  
of Teachers  
25 Louisiana Ave., N.W.  
Washington 1, D. C.

Dear Mr. Gibbons:

Thank you so very much for your letter of July 9th which arrived just a few days after I left for vacation in which you accepted the invitation of the American Protestant Hospital Association to participate in our annual meeting on January 28, 1964, at 3:00 p.m. in the Gold Room of the Sheraton-Jefferson Hotel. I am confident that the debate which you and Thomas B. Curtis, M.C., will have on this extremely important and timely topic, "Financing Medical Care - Whose Responsibility?", will be a major high light of our annual meeting. We are grateful that Governor John M. Dalton will give us a good beginning when he addresses us on Monday, January 27, and that you and Mr. Curtis will bring this meeting to a most stimulating conclusion on January 28.

Mr. Leo M. Lyons, Executive Directors of the American Protestant Hospital Association, will probably be in touch with you regarding details for which he has responsibility.

Thank you again for your welcomed acceptance of this most important assignment.

Personal best wishes.

Sincerely,

*Carl C. Rasche*

Carl C. Rasche, Chairman  
APHA Planning Committee

CCR:la



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Telephone MIssion 5-8510

# Deaconess Hospital

CARL C. RASCHE, L.H.D., Administrator 6150 OAKLAND AVE., ST. LOUIS 10, MO.

July 12, 1963

Mr. H. J. Gibbons  
Executive Assistant  
to the General President  
25 Louisiana Avenue N. W.  
Washington, D. C.

Dear Mr. Gibbons:


On behalf of the Reverend Mr. Rasche, who is presently on vacation, I have received your letter in which you indicate your willingness to participate in a debate with Representative Curtis on the subject "Financing Medical Care - Whose Responsibility?" at the January 28, 1964, meeting of the American Protestant Hospital Association.

If additional information is to be sent to you in advance of the debate, I am sure you will receive further communication from the appropriate party.

I know Dr. Rasche would want me to express his appreciation to you for your willingness to take part in the program.

Thank you so much!

Faithfully,

  
Richard P. Ellerbrake  
Assistant Administrator-Elect

RPE/ak

ADMINISTRATIVE FILE  
American Protestant  
Hospital Association  
X

July 9, 1963

Dr. Edward Berger, Medical Director  
St. Louis Labor Health Institute  
1641 South Kingshighway  
St. Louis, Missouri

Dear Dr. Berger:

Enclosed are copies of an invitation to speak at the  
Annual Meeting of the APHA, and my acceptance of the invitation.

Will you please work up some notes for my use from  
your previous speeches on this subject. Cah Calloway will prob-  
ably be able to help you out on this.

Very truly yours,

H. J. Gibbons  
Executive Assistant  
to the General President

HJG/inc

Enclosures

July 9, 1963

Mr. Carl C. Rasche, Chairman  
APHA Planning Committee  
Danco Hospital  
6150 Oakland Avenue  
St. Louis 10, Missouri

Dear Mr. Rasche:

Thank you for your letter of July 1st, requesting me to participate in a debate with Thomas B. Curtis, M.C., on the subject "Financing Medical Care - Whose Responsibility?" at your annual meeting on January 28, 1964. Please consider this letter my acceptance of your kind invitation.

I shall be looking forward to a challenging and informative session. With best regards, I remain

Sincerely yours,

H. J. Gibbons  
Executive Assistant  
to the General President

HJG/mc

FOUNDED 1889



Telephone MUxion 5-8510

# Deaconess Hospital

CARL C. RASCHKE, L.H.D., Administrator

8150 OAKLAND AVE., ST. LOUIS 10, MO

July 1, 1963

Mr. Harold J. Gibbons  
International Brotherhood  
of Teamsters Union  
25 Louisiana Ave., N.W.  
Washington 3, D. C.

Dear Mr. Gibbons:

I write to you as Chairman of the Planning Committee for the Annual Meeting of the American Protestant Hospital Association which is to be held in St. Louis at the Sheraton-Jefferson Hotel on January 27 and 28, 1964.

The Planning Committee recognizes that one of the major health questions that confronts our nation is related to the problem of financing health care and the proposed Federal legislation which would offer health care financing at least to a greater degree than is now available through implementation of the Kerr-Mills Law.

It was the committee's strong feeling that invitations should be extended to two of the most forceful individuals in our national life to speak on this subject within the framework of a debate. Therefore, I should now like to extend an invitation to you to enter into a debate on the subject of "Financing Medical Care--Whose Responsibility?" with the Honorable Thomas B. Curtis, M.C., United States Representative, 2nd District of Missouri, at 3:00 p.m. on Tuesday, January 28, 1964, in the Gold Room of the Sheraton-Jefferson Hotel. This confrontation would be listed as follows:

3:00 p.m. - A debate - "Financing Medical Care--Whose Responsibility?"

Government - Mr. Harold J. Gibbons, Vice President,  
Teamsters International Union and  
President, St. Louis Labor Health  
Institute

Voluntary - The Honorable Thomas B. Curtis, M.C.,  
United States Representative,  
2nd District of Missouri



Mr. Harold J. Gibbons

-2-

It would be my suggestion that you and Mr. Curtis each speak for approximately 20 minutes, after which each of you would take 5 minutes to respond to the pertinent points made by the other. This would allow approximately 10 to 15 minutes for questions from participants in the convention.

There will be approximately 500 professional hospital administrators and hospital trustees attending this session, as well as several hundred other administrators and trustees of health and welfare agencies belonging to 11 Protestant denominations across our nation, including such agencies as homes for children, homes for the aged, social settlement houses and the like.

I do hope that you will look favorably upon this invitation. Please advise me if there will be expenses involved in your participation in our program.

Sincerely,

*Carl C. Rasche*

Carl C. Rasche, Chairman  
APHA Planning Committee

CCR:ls